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APPLICANTS

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**** CONTINUING DATA *******
none

**** FOREIGN APPLICATIONS *******
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 02/06/2002**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 4	TOTAL CLAIMS 56	INDEPENDENT CLAIMS 5
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Verified and Acknowledged
 Examiner's Signature *[Signature]* Initials *[Initials]*

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TITLE
 Hydraulically compensated stabilizer system

FILING FEE RECEIVED 1936	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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